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APPLICANTS

Shiu-Ru Lin, Kaohsiung City, TAIWAN;

Jaw-Yuan Wang, Kaohsiung City, TAIWAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 8	TOTAL CLAIMS 79	INDEPENDENT CLAIMS 73
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Verified and Acknowledged

Examiner's Signature _____ Initials _____

ADDRESS

TROXELL LAW OFFICE PLLC
 5205 LEESBURG PIKE, SUITE 1404
 FALLS CHURCH, VA
 22041

TITLE

Genes for diagnosing colorectal cancer

FILING FEE RECEIVED 3926	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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